## 1403 - 131 - 3420

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED

Office Use Only 17 AH 10: 25

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	FEC MAIL CENTER
Committee	to Ellecti	Jesse, T, Sm	ith For C	oingress
			1 1 1 1 1 1 1	
ADDRESS (number and street)	13,3, Lee	Rd, 2076		
(Check if address is changed)				
	CITY A	C, i, +, V, , , , , , , , , , , , , , , , ,	A  L   3 6 8 STATE ▲	ZIP CODE A
COMMITTEE'S E-MAIL ADDRESS				
(Check if address is changed)				
	Optional Second E-Ma	uil Address		
			1.1.1.1.1.	
		•		
COMMITTEE'S WEB PAGE ADDRESS (URL)				
(Check if address	W.W.W U. + . 4 .	C10,n,g,r,e,5,5,2,0,1,4	4. Com	
is changed)		<u> </u>		
			<del></del>	
2. DATE (10)	\$ 2014			
3. FEC IDENTIFICATION NU	JMBER ▶		•	•
4. IS THIS STATEMENT	NEW (N) O	R AMENDED (A)		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.				
Type or Print Name of Treasurer Jesse J. Smith				
Signature of Treasurer	)m	W	Date D /	3 2014
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use		For further Information Federal Election Commi Toll Free 800-424-9530	ssion FE	C FORM 1 evised 06/2012)